

08-02-01

A

Please type a plus sign (+) inside this box ☒

UTILITY PATENT APPLICATION TRANSMITTAL

(only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

CEN0248

First Inventor

David M. Knight, et al.

Title

Anti-IL-12 Antibodies, Compositions, Methods And Uses

Express Mail Label No.

EL691435425US

1c978 U.S. PRO 09/920262

08/01/01

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, DC 202311. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(submit an original and a duplicate for fee processing)2. ☐ Applicant claims small entity status.3. ☒ Specification [Total Pages 80]
(Preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 USC 113) [Total Sheets 10]

5. Oath or Declaration [Total Pages 4]

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. ☒ Computer Readable Form (CRF)
- b. ☒ Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☒ paper
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- 9. ☐ Assignment Papers (cover sheet & document(s))
- 10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
- 11. ☐ English Translation Document (if applicable)
- 12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
- Citations
- 13. ☐ Preliminary Amendment
- 14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- 15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- 16. ☐ Request and Certifications under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- 17. ☐ Other

18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:
☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed
Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

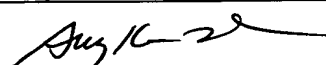
☒ Customer Number or Bar Code Label **000027777** or ☐ Correspondence Address below

Name: Philip S. Johnson, Esq.
Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003 USA

20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Guy Kevin Townsend at:
Telephone: (732) 524-2517 Fax: (732) 524-2808

21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Guy Kevin Townsend	Reg. No. 34033
SIGNATURE		
DATE	August 1, 2001	

FEE TRANSMITTAL	<i>Complete if Known</i>	
	Application Number	
	Filing Date	
	First Named Inventor	David M. Knight, et al.
	Group Art Unit	
	Examiner Name	
Attorney Docket Number		CEN0248


FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE
TOTAL CLAIMS	101 - 20 =	81	x 18.00	\$710.00
INDEPENDENT CLAIMS	37 - 3 =	34	x 80.00	\$1,458.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	\$2,720.00
			TOTAL FEES	\$4,888.00

METHOD OF PAYMENT

- ☒ Please charge Deposit Account No. 10-0750/CEN0248/GKT in the amount of \$4,888.00. Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CEN0248/GKT. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	Guy Kevin Townsend	Reg. No. 34,033
Signature		Deposit Account No. 10-0750
Date: 8/1/01		

09920263 080404

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David M. Knight, et al.

For : Anti-IL-12 Antibodies, Compositions, Methods And
Uses

Express Mail Certificate

"Express Mail" mailing number: EL691435425US

Date of Deposit: August 1, 2001

I hereby certify that this complete Application, including 80 Specification Pages, 101 Claims, Sequence Listing, 10 Sheets Informal Drawings, and, executed Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Honorable Commissioner for Patents, Washington, D.C. 20231.

Karen Hall-Morgan

(Typed or printed name of person mailing paper or fee)

Karen Hall-Morgan

(Signature of person mailing paper or fee)

09920263 080101
"25202650"

FEE TRANSMITTAL	<i>Complete if Known</i>	
	Application Number	
	Filing Date	
	First Named Inventor	David M. Knight, et al.
	Group Art Unit	
	Examiner Name	
Attorney Docket Number	CEN0248	

1-978 U.S. PTO
09/920262
08/01/01

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	101 - 20 =	81	x 18.00	\$1,458.00
INDEPENDENT CLAIMS	37 - 3 =	34	x 80.00	\$2,720.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$4,888.00

METHOD OF PAYMENT

☒ Please charge Deposit Account No. 10-0750/CEN0248/GKT in the amount of \$4,888.00.
Three copies of this sheet are enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CEN0248/GKT. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	Guy Kevin Townsend	Reg. No. 34,033
Signature	<i>Guy Kevin Townsend</i>	Deposit Account No. 10-0750
	Date: 8/1/01	